Docket No.: 107504

ICATION FOR UNITED STATE DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

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i hereby	y state that I	have reviewed and	understa	and the contents of	the above-i	dentified s	pecificat	ion, incl	luding the claims,
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l acknor 37, Code of Feder	-	uty to disclose to the	Office	all information kno	wn to me to	o be mater	ial to par	entabilit	ty as defined in Ti
•	•	is, §1.56. . Code §119, the pr	iority he	enefits of the follow	vina foreia	n annlicati	one and	or Unit	ad States provision
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•		e following as my a	-	s of record with fu	ıll power o	of substitut	ion and	revocat	ion to prosecute t
application and to	transact all o	usiness in the Patent James A. Oliff, Re		7 N75: William P	Ressidae E	Rea No 3	1024.		
		James A. Omi, Ke	g. 110. ±	.,,v,,,, ** iiiiaiii L •	Dellinge, L	veg. 110. 31	,,,,,,		
		Kirk M. Hudson, F	leg. No.			Reg. No. 3	0,411;		
		Edward P. Walker	, Reg. N	. 27,562; Thomas J (o. 31,450; Robert	. Pardini, I A. Miller, i	Reg. No. 3	2,771;		
	Mario A		, Reg. N	. 27,562; Thomas J (o. 31,450; Robert	. Pardini, I A. Miller, i	Reg. No. 3	2,771;	4,463.	
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including country)

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE

^{*}If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

^{**}Note to Inventor: Please sign name-exactly as it appears above and insert actual date of signing.

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•		Given Name	Middle Initial	ISSHIKI Family Name
**Inventor's Signature	e: . <u></u>	Vauve.		Crohiles.
**Date of Signature:		March 16, 200	1	
		Month	Day	Year
Residence:	Nago	oya-shi	Aichi	Japan
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^{**}Note t Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.